

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SF		10-3-01
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	32	10/2
FORMALITY REVIEW	Hayer	760	10-26-01

412

### INDEX OF CLAIMS

03/11/02

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	08/06/01
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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Best Available Copy

617  
3-11-02